

## Washington County Coalition for Children

To: Chair Rep. Susan Donovan and Members of the House Health & Human Services Committee

Date: April 10, 2025

RE: Support for H6118 Commercial Insurance Coverage for Youth MRSS

I write on behalf of the Washington County Coalition for Children in strong support of H6118 requiring commercial insurance plans to provide coverage for youth Mobile Crisis and Stabilization Services (MRSS).

We see this legislation as vital to securing a long-term sustainable funding stream for an effective behavioral health crisis system for our youth. With the implementation of 9-8-8 and successful implementation of Mobile Response & Crisis Stabilization Services (MRSS) by Tides Family Services and Family Service of RI, we finally have the building blocks for ending the shameful boarding of children and youth in our Emergency Depts. (EDs). MRSS is considered the gold standard in crisis care for youth. See our attached FACT SHEET for details.

EOHHS has implemented its plan to provide mobile crisis services by including the responsibility in its CCBHC contracts, which began on October 1, 2024. The state's CCBHCs are required to provide mobile crisis services to any RI resident, including children, regardless of insurance. But CCBHCs are only able to bill Medicaid for their services. Why should commercial insurers get off the hook and the state or more likely CCBHC vendors absorb these costs? The payment model should be similar to that of Early Intervention (for children ages 0-3), all children found eligible for services receive them and commercial insurers are expected to pay for those services.

With only 1/3 of our children covered by Medicaid, Washington County has long been underserved with countless families struggling to obtain needed mental health services for their children. Numerous providers have reported the state's chronically low reimbursement rates contribute to the problem. In fact, our community mental health center has been unable to meet the needs of children in our region for decades. To secure needed crisis services for ALL children in RI that need them, we need to think beyond time limited federal grants and Medicaid billing. This short-term thinking and lack of vision has contributed to the broken and fragmented system of care we have in RI for children's behavioral health. With the implementation of 9-8-8 and MRSS, we have the opportunity to design a system that truly works. Your challenge is making it sustainable. This bill is a step in the right direction.

With a functioning and sustainable crisis system in place, we could end the boarding of our children in crisis in local EDs by requiring commercial insurers to pay for these services.

For all these reasons, we urge you to pass H6118.

Sincerely,

  
Robert Hicks

Washington County Coalition for Children  
Volunteer Lobbyist

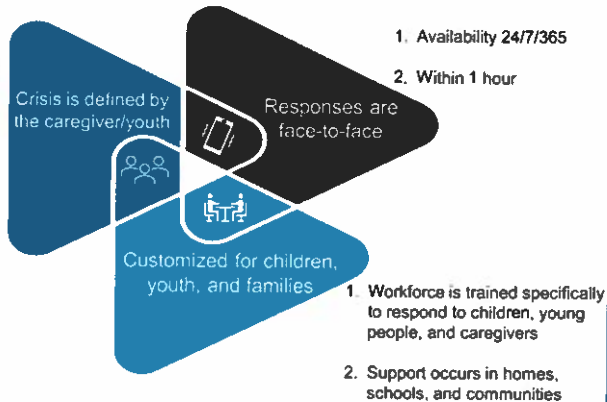
# COMMERCIAL INSURANCE COVERAGE OF YOUTH MOBILE RESPONSE & STABILIZATION SERVICES H6118/S0263

## WHAT ARE MOBILE RESPONSE & STABILIZATION SERVICES (MRSS)?

A cornerstone of an effective children's behavioral health system. MRSS provides **face-to-face intervention, crisis de-escalation, assessment of needs**, and **safety planning** to families with **children in crisis ages 2-21 upon request 24/7/365**. In addition, **stabilization services** and connections to additional supports and resources occur for up to **six to eight weeks**.

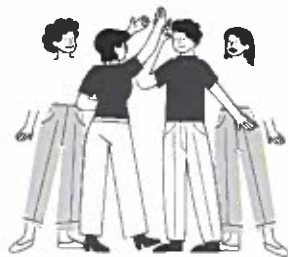
### MRSS Basics

1. Screen in, not out
2. Callers know why and when they need help; we believe them



### MRSS BENEFITS

- Immediate **risk assessment** (e.g., suicide, self-harm, or harm to others).
- Diverts individuals from **emergency departments** and **law enforcement involvement**.
- **Crisis de-escalation** within the family and community context.
- Prevents **unnecessary hospitalizations** or **out-of-home placements** for children.



Includes family-related conflicts, school-related pressures, or trauma events requiring immediate support.



Includes suicidal ideation, psychosis, or acute behavioral disturbances impacting public safety or personal well-being.

"Children in crisis need timely and tailored support that addresses not only the immediate situation but also the underlying causes."

## WHAT WOULD H6118/S0263 DO?

(Sponsors Rep Tanzi/Sen. DiMario)

**Require that commercial insurers cover MRSS services**, an emergency, community-based mental health service for children/youth and their families

### WHY IS THIS BILL IMPORTANT?

- **MRSS works!** and is the gold standard for crisis services for children & youth - *From Nov. 2022- Feb 2024, 92% of children referred to MRSS were deferred from Emergency Depts. and stabilized.*
- MRSS is a **critical part of the state's crisis system for children** and **needs a reliable and sustainable source of funding**, both now and into the future.
- MRSS is **primarily reimbursed through Medicaid** as a subcontracted service of the local community mental health centers (CCBHCs). CCBHCs are funded through a federal time-limited grant; Blue Cross Blue Shield RI is the only insurer in RI that covers MRSS.
- **All RI children & youth should have access to MRSS when in crisis** - this bill helps make that happen by providing a needed funding stream to support MRSS.



For more information, contact Susan Orban, Director-Washington County Coalition for Children  
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